## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est, time per response: 1 hour

## **COMMON CARRIER ANNUAL EMPLOYMENT REPORT**

[Please read instructions before completing and for Notice regarding public burden.]

| SECTION 1 - General Information   | n          |   |       | •                               |   |  |   |   |       |                                 |   |       |  |                   |       |  |  |  |
|---|------------|---|-------|---------------------------------|---|--|---|---|-------|---------------------------------|---|-------|--|-------------------|-------|--|--|--|
| 1. Name and Mailing Address of  | Respondent |   |       |                                 |   |  |   |   |       |                                 |   |       | ' -  |                   |       |  |  |  |
| Harrisonville Telephone Company 213 S. Main St. P.O. Box 149 Waterloo, IL 62298         |            |   |       |                                 |   |  |   |   |       |                                 |   |       | Check here if this is a change of address. |                   |       |  |  |  |
| 2. Year Report Filed  3. Reporting Period (Ending Date of Pay Period Covered by Report) |            |   |       |                                 |   |  |   | Number of Full-Time Employees during Selected     Regorling Period (check one): |       |                                 |   |       |  |                   |       |  |  |  |
| 2019  |            | h 16, 20  |       |                                 |   | a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections) |   |   |       |                                 |   |       |  |                   |       |  |  |  |
| SECTION II - Full-Time Employe  | es.        |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   |       |  |  |  |
| Job<br>Categories   |            | Number of Employees (Report employees in only one category) |       |                                 |   |  |   |   |       |                                 |   |       |  |                   |       |  |  |  |
|   |            |   |       |                                 |   |  |   | Race/Ethnicity  | •     |                                 |   |       |  |                   |       |  |  |  |
|   |            | panic or<br>atino   |       |                                 |   |  | Not-Hispanic or Latino                    |   |       |                                 |   |       |  |                   | Total |  |  |  |
|   | 1 '        | auno  |       |                                 | Ma  | ale  |   |   |       |                                 | Columns<br>A - N                                      |       |  |                   |       |  |  |  |
|   | Male       | Female  | White | Slack or<br>African<br>American | Native<br>Hawailan or<br>Other<br>Pacific<br>Islander | Asian  | American<br>Indian or<br>Alaska<br>Native | Two or more races   | ₩hite | Black or<br>African<br>American | Native<br>Hawailan or<br>Other<br>Pacific<br>Islander | Asian | American<br>Indian or<br>Alaska<br>Native  | Two or more races | A-11  |  |  |  |
|   | A          | В   | С     | D                               | ε   | F  | G   | н   | ı     | J                               | к   | L     | М  | N                 | 0     |  |  |  |
| Executive/Senior Level 1.   | 1          |   | 3     |                                 |   |  |   |   | 1     |                                 |   |       |  |                   | 4     |  |  |  |
| First/Mid-Level Officials and 1.  | 2          |   | 27    |                                 | _   |  |   |   | 11    |                                 |   |       | ·  |                   | 38    |  |  |  |
| Professionals   | 2          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| Technicians   | 3          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| Sales Workers   | 4          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| Administrative Support<br>Workers   | 5          |   | 1     |                                 |   |  |   |   | 15    | 2                               |   |       | 1  |                   | 19    |  |  |  |
| Craft Workers   | 6          |   | 27    |                                 |   |  |   |   | 3     |                                 |   |       |  |                   | 30    |  |  |  |
| Operatives  | 7          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| Laborers and Helpers  | 8          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| Service Workers   | 9          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |
| TOTAL 1   | 0 0        | 0   | 58    | 0                               | 0   | 0  | 0   | 0   | 30    | 2                               | 0   | 0     | 1  | 0                 | 91    |  |  |  |
| DDEMOUS VEAD TOTAL 4  | ,          |   |       |                                 |   |  |   |   |       |                                 |   |       |  |                   | 0     |  |  |  |

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| SECTION III - Part-Time Emplo  | oyees.  |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
|--|---|--|--------------|---------------------------------|---|--|---|-------------------|-------|---------------------------------|---|-------|---|-------------------|-----------|--|
|  |   | Number of Employees<br>(Report employees in only one category) |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
| Job  |   | Race/Ethnicity   |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
| Categories   |   | Hispanic or<br>Latino  |              | Not-Hispanic or Latino          |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
|  | '   |  |              | Male                            |   |  |   |                   |       |                                 | Female  |       |   |                   |           |  |
|  | Male  | Female   | White        | Black or<br>African<br>American | Native<br>Hawaiian or<br>Other<br>Pacific<br>Islander | Asian  | American<br>Indian or<br>Alaska<br>Native | Two or more races | White | Black or<br>African<br>American | Native<br>Hawaiian or<br>Other<br>Pacific<br>Islander | Asian | American<br>Indian or<br>Alaska<br>Native | Two or more races | A-N       |  |
|  | Α   | В  | С            | D                               | E   | F  | G   | Н                 | 1     | J                               | К   | L     | М   | N                 | 0         |  |
| Executive/Senior Level<br>Officials and Managers   | 1.1   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| First/Mid-Level Officials and<br>Managers  | 1.2   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Professionals  | 2   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Technicians  | 3   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Sales Workers  | 4   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Administrative Support<br>Workers  | 5   |  |              |                                 |   |  |   |                   |       |                                 |   | l¥    |   |                   | 0         |  |
| Craft Workers  | 6   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Operatives   | 7   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Laborers and Helpers   | 8   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| Service Workers  | 9   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| TOTAL  | 10 0  | 0  | 0            | 0                               | 0   | 0  | 0   | 0                 | 0     | 0                               | 0   | 0     | 0   | 0                 | 0         |  |
| PREVIOUS YEAR TOTAL  | 11  |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   | 0         |  |
| SECTION IV - Report of Discri  | mination Comp   | laints Pursua  | nt to 47 CFR | 22.321, 23.5                    | 5, 90.168, 101  | .4, and 101.   | 311.                                      |                   |       | **                              |   |       |   |                   |           |  |
| This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.  This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.  (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition. |   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
| SECTION V - Certification  |   |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |
| I certify that to the best of my known   |   |  |              | ents in this rep                | oort are true ar                                      | nd correct.  |   |                   |       |                                 |   |       |   |                   |           |  |
|  | yped or Printed   |  | on Signing   |                                 |   | Signature Telephone No.  |   |                   |       |                                 |   |       |   |                   |           |  |
|  | Karen G.  | Bergman  | n            | hant t Et it is a               | EALOE OT !  | Harrisonville Telephone Company by: (618) 939-6112  EMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION |   |                   |       |                                 |   |       |   |                   | TANGET OF |  |
|  | WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION  Exec. Vice President & Secretary-Treasurer  WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR FORESTURE (47 U.S.C. 303). |  |              |                                 |   |  |   |                   |       |                                 |   |       |   |                   |           |  |